



Application No. (if known): 10/810,491

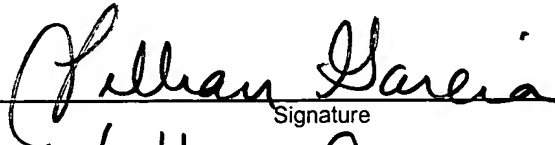
Attorney Docket No.: 20154/0201085-US0

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on September 19, 2006
Date


Signature

Lillian Garcia
Typed or printed name of person signing Certificate

Registration Number, if applicable

212-527-7700
Telephone Number

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Five Month Request for Extension of Time (1 page)
Request for Continued Examination Transmittal (RCE) (1 page)
Petition to Revive Unintentionally Abandoned Application with
Exhibit A attached (3 pages)
Preliminary Amendment Accompanying A Request
for Continued Examination (RCE (13 pp)
Amendment Transmittal Sheet (1 page)
Fee Transmittal Sheet (1 page); Fee Summary Sheet (1 pg)
Check no. 12555 in the amount of \$4850.00
Return Receipt Postcard



FEE SUMMARY SHEET

Petition for Extension of Time Under 37 CFR 1.136(a) (PTO SB-22)

Date: September 19, 2006
Time: 10:26 AM
Docket: 20154/0201085-US0

Filing Date: March 26, 2004
Application No: 10/810,491
Total Fee: \$ 4,850.00

Code	Amount	37 CFR	Fee Description	Listed on
1255	2,160.00	1.17(a)(5)	Extension for response within fifth month	Fee Transmittal (PTO SB-17)
1202	1,500.00	1.16(i)	Claims in excess of twenty	Fee Transmittal (PTO SB-17)
1201	400.00	1.16(h)	Independent claims in excess of three	Fee Transmittal (PTO SB-17)
1801	790.00	1.17(e)	Request for continued examination (RCE) (see 37 CFR 1.114)	Fee Transmittal (PTO-SB-17)

**AMENDMENT TRANSMITTAL LETTER**Docket No.
20154/0201085-US0Application No.
10/810,491-Conf. #8127Filing Date
March 26, 2004Examiner
S. R. KastlerArt Unit
1742

Applicant(s): Yoshikazu Okada et al.

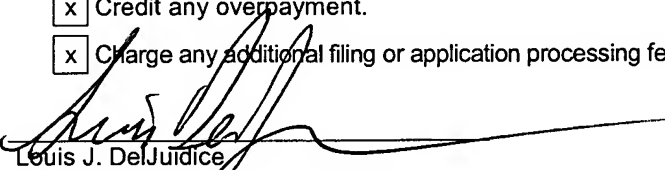
Invention: METHOD FOR MANUFACTURING THROWAWAY TIP AND APPARATUS FOR ALIGNING GREEN COMPACT

TO THE COMMISSIONER FOR PATENTS

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	50	- 20 =	30	x 50.00	1,500.00
Independent Claims	5	- 3 =	2	x 200.00	400.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify): Extension for response within fifth month					2,160.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					4,060.00

☒ Large Entity☐ Small Entity☐ No additional fee is required for this amendment.☐ Please charge Deposit Account No. 04-0100 in the amount of \$ _____.
A duplicate copy of this sheet is enclosed.☒ A check in the amount of \$ 4,850.00 to cover the filing fee is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized to charge and credit Deposit Account No. 04-0100
as described below. A duplicate copy of this sheet is enclosed.☒ Credit any overpayment.☒ Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.
Louis J. DeJuidice
Attorney/Agent Reg. No.: 47,522Dated: September 19, 2006DARBY & DARBY P.C.
P.O. Box 5257
New York, New York 10150-5257
(212) 527-7791



Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known	
FEE TRANSMITTAL For FY 2005		Application Number	10/810,491-Conf. #8127
		Filing Date	March 26, 2004
		First Named Inventor	Yoshikazu Okada
		Examiner Name	S. R. Kastler
		Art Unit	1742
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27	Attorney Docket No.	20154/0201085-US0	
TOTAL AMOUNT OF PAYMENT	(\$) 4,850.00		

METHOD OF PAYMENT (check all that apply)	
<input checked="" type="checkbox"/> Check	<input type="checkbox"/> Credit Card
<input type="checkbox"/> Money Order	<input type="checkbox"/> None
<input type="checkbox"/> Other (please identify): _____	
<input type="checkbox"/> Deposit Account	Deposit Account Number: <u>04-0100</u> Deposit Account Name: <u>Darby & Darby P.C.</u>
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILING FEES		SEARCH FEES		EXAMINATION FEES		
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FEES							
						Small Entity	
Fee Description						Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)						50	25
Each independent claim over 3 (including Reissues)						200	100
Multiple dependent claims						360	180
Total Claims		Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims		
50		- 20 = 30	x 50.00 =	1,500.00			
HP = highest number of total claims paid for, if greater than 20.							
Indep. Claims		Extra Claims	Fee (\$)	Fee Paid (\$)			
5		- 3 = 2	x 200.00 =	400.00			
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof		Fee (\$)	Fee Paid (\$)		
	- 100 =	/50 (round up to a whole number) x					
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): 1255 Extension for response within fifth month						2,160.00	
1801 Request for Continued Examination (RCE)						790.00	

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	47,522
Name (Print/Type)	Louis J. Del Giudice	Telephone	(212) 527-7791
		Date	September 19, 2006